

## HAWAII STATE ETHICS COMMISSION

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## LOBBYIST REGISTRATION FORM

(Type or Print Clearly) U **LOBBYIST** .I₃. PART I TELEPHONE NAME(Last) (First) (Middle) Piltz Karen 528-8200 M.L. MAILING ADDRESS (Street) FAX 745 Fort Street, 9th Floor 536-5869 (City) (State) (Zip Code) НΙ 96813 Honolulu EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby) **TELEPHONE** Chun Kerr Dodd Beaman & Wong, LLLP 528-8200 FAX MAILING ADDRESS (Street) 536-5869 745 Fort Street, 9th Floor (City) (State) (Zip Code) ΗΙ 96813 Honolulu

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	nmunications & lic Utilities	[	]	Government Operations & Finance	[	]	Intergovernmental Relation	ons,	[	]	Tourism & Recreation	
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	ure, Arts, Historic servation	[	]	Health	ĺ	]	Planning, Land & Water Use Management		[	]	Other: (indicate below)	
	logy, Energy ironmental Protection	[	]	Housing	[	]	Public Safety & Correctio	ns				
PART IV CERTIFICATION OF LOBBYIST												
I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.												
1/20/05 3/25/05												
0	00	(Sigr	nati	ure of Lobbyist)				(Da	ıte)			
PART V AUTHORIZATION TO LOBBY												
NAME TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED												
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Rex Kuwasaki President												
NAME OF ORGANIZATION (if applicable)					TELEPHONE							
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Mililani Grou	up, Inc.							527-5	21	1		
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I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.												
3/29/05												
(Signature of Authorizing Officer or Person Represented) (Date)												